

Permits: 410-313-2455
Inspections: 410-313-1810
Automated Line: 410-313-3800

Howard County Building/Fire Permit Application
Department of Inspections, Licenses & Permits
3430 Court House Drive
Ellicott City, MD 21043

Permit Number:

Building Address: 11954 Queen St
Fulton MD 20759
Suite/Apt. # _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: _____
Section: _____ Area: _____ Lot: 8
Tax Map: 41 Parcel: 67 Grid: 13
Zoning: _____ Map Coordinates: _____ Lot Size: 5.36 AC

Existing Use: Yard
Proposed Use: Pool
Estimated Construction Cost: \$ _____
Description of Work: pool 16x40' built in to ground

Occupant or Tenant: _____
Was tenant space previously occupied? ☐ Yes ☐ No
Contact Name: Barbara Schaeffer
Address: 790 S 8011th Rd
City: Glen Burnie MD State: MD Zip Code: 21060
Phone: 410-733-0433 Fax: 410-360-9309
Email: allaboutpermits@hotmail.com

BUILDING DESCRIPTION - COMMERCIAL

Building Characteristics	Utilities
Height:	<u>Water Supply</u>
No. of stories:	<input type="checkbox"/> Public
Gross area, sq. ft./floor:	<input type="checkbox"/> Private
	<u>Sewage Disposal</u>
Area of construction (sq. ft.):	<input type="checkbox"/> Public
	<input type="checkbox"/> Private
Use group:	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<u>Construction type:</u>	<u>Heating System</u>
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Masonry	<u>Sprinkler System:</u>
<input type="checkbox"/> Wood Frame	<input type="checkbox"/> N/A
<input type="checkbox"/> State Certified Modular	<input type="checkbox"/> Full
<input checked="" type="checkbox"/> <u>Roadside Tree Project Permit</u>	<input type="checkbox"/> Partial
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Other Suppression
<u>Roadside Tree Project Permit #</u>	No. of Heads:

Property Owner's Name: Gregory Subar
Address: 11954 Queen St
City: Fulton State: MD Zip Code: 20759
Home Phone: 301-415-8087 Work Phone: _____
Applicant's Name & Mailing Address, (If other than stated herein):
Barbara Schaeffer All About Permits
410-733-0443
Phone: 301-415-8087 Fax: _____
Email: _____

Contractor Company: Leisure Contracting Inc.
Contact Person: Glen Lau
Address: 210 Clyde St
City: Baltimore State: MD Zip Code: 21227
License No.: 85655
Phone: 413-790-3005 Fax: _____
Email: _____

Engineer/Architect Company: _____
Responsible Design Prof.: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
<u>Depth</u> <u>Width</u>	<input type="checkbox"/> Public
1 st floor:	<input checked="" type="checkbox"/> Private
2 nd floor:	<u>Sewage Disposal</u>
Basement:	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input checked="" type="checkbox"/> Private
<input type="checkbox"/> Unfinished Basement	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms:	<input type="checkbox"/> Electric
<u>Multi-family Dwelling</u>	<input type="checkbox"/> Oil
No. of efficiency units:	<input type="checkbox"/> Natural Gas
No. of 1 BR units:	<input type="checkbox"/> Propane Gas
No. of 2 BR units:	
No. of 3 BR units:	
Other Structure:	
Dimensions:	
Footings:	<input checked="" type="checkbox"/> <u>Roadside Tree Project Permit</u>
Roof:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> State Certified Modular	<u>Roadside Tree Project Permit #</u>
<input type="checkbox"/> Manufactured Home	

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature: Barbara Schaeffer
Email Address: All About Permits @Hotmail.com
Title/Company: All About Permits LLC

Print Name: Barbara Schaeffer
Date: 4/24/2014

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

PLEASE WRITE NEATLY & LEGIBLY

-FOR OFFICE USE ONLY-

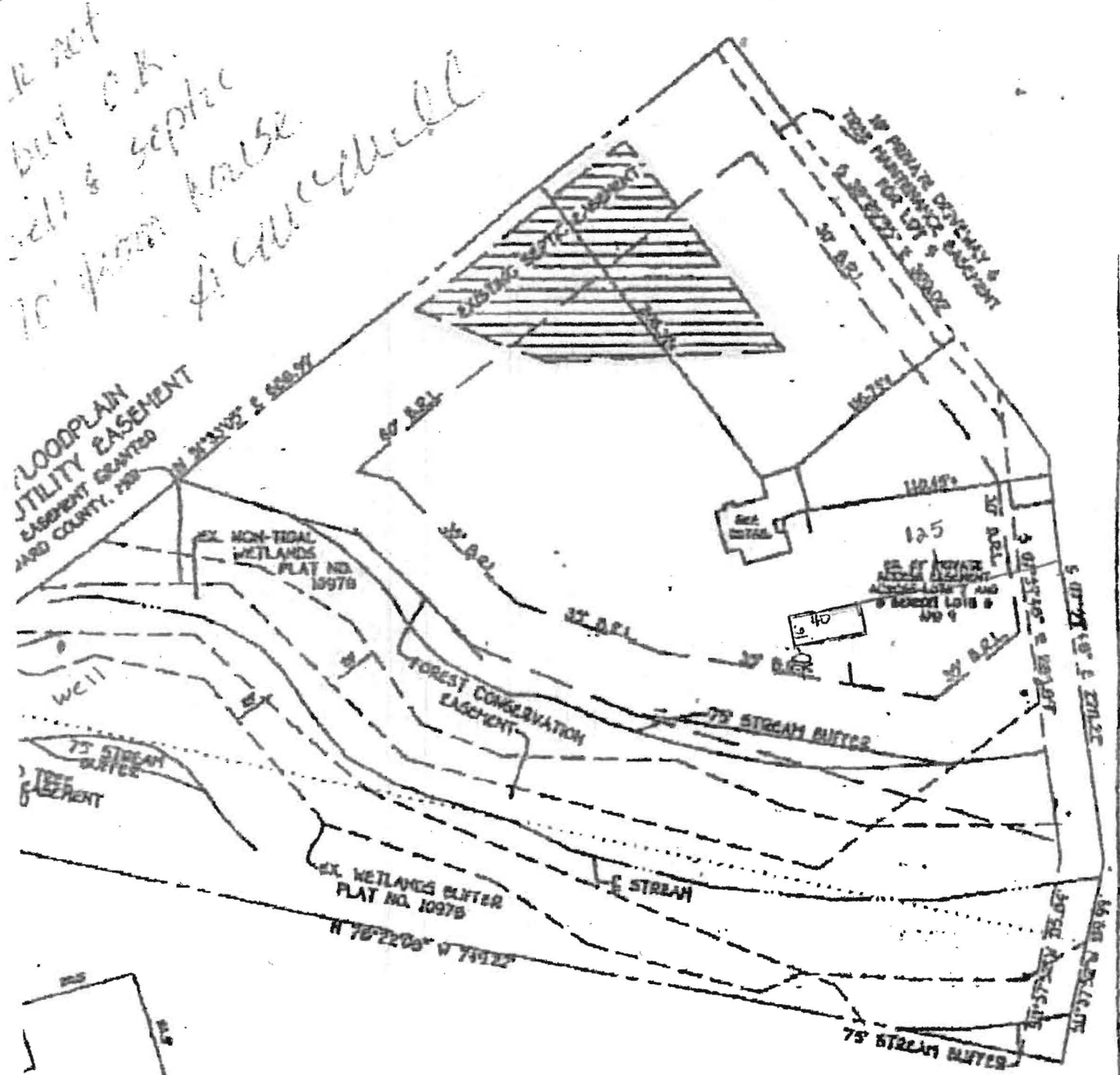
AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health		
Fire Protection	<u>4/24/14</u>	<u>Anders</u>

Is Sediment Control approval required for issuance? ☐ Yes ☐ No
☐ CONTINGENCY CONSTRUCTION START
☐ ONE STOP SHOP

DPZ SETBACK INFORMATION
Front:
Rear:
Side:
Side St.:
All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No
Lot Coverage for New Town Zone:
SDP/Red-line approval date:

Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$

TY IS SHOWN IN ZONE C ON THE NATIONAL FLOOD INSURANCE PROGRAM FLOOD INSURANCE
HOWARD COUNTY, MARYLAND, COMMUNITY PANEL No. 240044 0041 B EFFECTIVE
1977
 H BUILDING LINE TO PROPERTY LINE AS SHOWN ON THE PLAT HEREON ARE TO AN ACCURACY OF
 1/2"
 FURNISHED, SUBJECT TO ALL EASEMENTS AND CONDITIONS OF RECORD.



APPROVED

WALK-THRU BUILDING PERMIT

BP# _____ A# _____
 APP. SAN AG DATE: 4/24/14
 DESC. OF WORK: 16' x 40' ingrand
pool

16' x 40'

LOT B
 MALCOLM PROPERTY
 LOTS 4-12
 5TH ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND
 PLAT REF 14071